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APPLICANTS

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** CONTINUING DATA ***** CD none** FOREIGN APPLICATIONS ***** CD none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 4	TOTAL CLAIMS <u>17</u> / 18	INDEPENDENT CLAIMS <u>4</u> / 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged <u>[Signature]</u> Examiner's Signature	Initials <u>CD</u>		

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TITLE

Two-dimensional discrete cosine transform using SIMD instructions

FILING FEE RECEIVED 1048	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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